

## **Request for Service-Learning Project**

Your Contact Information:	
Name & Title:	
Phone: E-mail:	
Agency Information:	
Agency Name:	
Agency Address:	
Agency Website:	
Agency Mission/Vision:	
Types of Service Provided:	
<ul> <li>Animal Welfare</li> <li>Arts &amp; Culture</li> <li>Children &amp; Youth Education/Mentoring</li> <li>Crisis Support</li> <li>Disaster Relief/Emergencies</li> <li>Food Insecurity/Hunger Relief</li> <li>Environment</li> <li>Adult Education/Mentoring</li> <li>Health/Medical</li> <li>Housing/Homelessness</li> <li>Immigrants &amp; Refugees</li> </ul> Details about proposed project: What are the intended short & long-term goals of the Project	<ul> <li>♣ LGBTQ</li> <li>♣ People with Disabilities</li> <li>♣ Seniors/Elder Care</li> <li>♠ Military &amp; Veterans</li> <li>♠ Race &amp; Ethnicity</li> <li>♠ Women</li> <li>♠ Sports &amp; Recreation</li> <li>♠ International</li> <li>♠ Advocacy/Politics</li> <li>♠ Other (Please Specify)</li> </ul>
Service Method Direct service Re	esearch AdvocacyOther
Time Investment:	
How many hours of service does your organization need per s	student per semester?
<9 hours10-19 hours	20+

Additional Information you would like to share: